**Application or Docket Number** 

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Effective October 1, 2001

42390P10938X

(Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			30				[	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	30 minus 20=		. 10			X\$ 9=			X\$18=	160
IND	EPENDENT CL	AIMS	(2) minus 3 = * (1)						OR		180	
MULTIPLE DEPENDENT CLAIM PRESENT								X42=		OR	X84=	
								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	920
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	IEST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	.23	Minus		Q	=		X\$ 9=		OR	X\$18=	
NE NE	Independent	. 5	Minus	(	2	= 2		X42=		OR	X84≃	172
	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDEN	T CLAIM			+140=		OR	+280=	_
								TOTAL		OR	TOTAL	1112
ADDIT. FEEON ADDIT. FEE												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Σ	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
NE NE	Independent	*	Minus	***		=		X42=		ÓR	X84=	
<	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDEN	T CLAIM		]			Un		
								+140=		OR	+280=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)	4		mn 2)	(Column 3)	١.			_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		1	X84=	
5	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	TCLAIN		J			OR	<b></b>	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=		
tre	** If the entry in column 1 is less than the entry in column 2, write 0 in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										TOTAL ADDIT. FEE	
	The "Highest Nun	mber Previously Pa	id For" (Total o	or Independ	dent) is th	e highest number	er fou	ınd in the ap	propriate bo	x in co	olumn 1.	